

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Jh		6/6/12
O.I.P.E. CLASSIFIER		49	6/11/12
FORMALITY REVIEW	ST	69916	8/3/10
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3-5-23
2	✓	✓	3-5-23
3	✓	✓	3-5-23
4	✓	✓	3-5-23
5	✓	✓	3-5-23
6	✓	✓	3-5-23
7	✓	✓	3-5-23
8	✓	✓	3-5-23
9	✓	✓	3-5-23
10	✓	✓	3-5-23
11	✓	✓	3-5-23
12	✓	✓	3-5-23
13	✓	✓	3-5-23
14	✓	✓	3-5-23
15	✓	✓	3-5-23
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18	✓	✓	3-5-23
19	✓	✓	3-5-23
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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